

2018

Walking Basketball Program

Evaluation report for Basketball Victoria



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Glossary

Walking basketball: Walking basketball is a modified version of the sport of basketball, first developed in the United Kingdom (U.K.) in 2013. It is a low impact and social way to improve the levels of physical activity for inactive and slightly active people, including those recovering from injury. The key modifications are the requirement to walk (rather than run) and that it is non-contact, with an emphasis on the social and fun components of the game. There are no international codified rules for the game, with different associations determining different rules and equipment. In Victoria, Basketball Victoria (BV) have introduced specific equipment for their program, such as portable standing (one metre high) hoops for scoring, which are much lower than the traditional fixed hoops in basketball. In Victoria, walking basketball programs are provided with suggested rules by BV, but each program facilitator is permitted to amend the rules to cater for their participants' capability and enjoyment, for example enabling underarm throws or using the standard basketball hoops¹.

Leisure-time physical activity (LTPA): This refers to an activity for exercise or recreation that is done during someone's leisure-time and not for home duties, travel or work. For example, an organised activity such as sport, walking groups or fitness classes. It can also refer to non-organised, recreational physical activity, such as walking for exercise or recreation, or incidental physical activity in everyday life².

Older adults: In sport, there is no defined 'older age' category. Masters sport categories differ by sport, for example Masters' competitions in gymnastics start at 20 years old. Previous research for older adults and sport has categorised older adults differently, for example 52-71 years³, 55-94 years⁴ and 50+ years old⁵. In this report, we have defined older adults as 50 years and over.

List of abbreviations

BV	Basketball Victoria
LTPA	Leisure-time physical activity
U.K.	United Kingdom

Executive Summary

Modified sport programs were initially developed for young children and were aimed at providing an opportunity to participate in a modified version of the adult-based sport. This involved modifying the sport to suit young participants and included changing the equipment, rules and/or physical space, in an effort to make sport more accessible and enjoyable for young children⁶. In the past seven years, this concept has been further developed to cater for adults and older adults, by accommodating those with reduced physical capabilities, such as injury rehabilitation, or for those seeking to re-engage with sport. The most popular iteration has been walking sports. Walking football (soccer) was first developed in the U.K. in 2011, before rugby, netball and basketball organisations similarly modified their rules and game structure, to make sport more accessible for those who do not engage with sport in its traditional format. In most of these walking sport programs, the participants tend to be older adults.

The aim of this report was to, firstly, understand current older adult participation trends in basketball, using the Sport and Recreation Spatial project data⁷. The second component of this report was to evaluate Basketball Victoria's walking basketball program, by evaluating two current programs in the Melbourne metropolitan area. The evaluation involved interviewing the program facilitators and conducting focus groups with the program participants.

For ease of reading, the walking basketball program is from here on referred to as the 'program'.

The aims of this research:

1. Participation trends – To understand the participation patterns in basketball, specifically the current participation of older adult aged registered basketball club members in Victoria.
2. Process evaluation – To investigate from the perspectives of the program facilitators and participants: the components of the program that worked well; suggested program improvements for future iterations of the program; and learnings from the program, such as schedule and potential future charges.
3. Outcome evaluation – To investigate from the perspectives of the program facilitators and participants: the motivations and benefits of participation in the program. Furthermore, the intentions of participants and facilitators to continue being actively involved in basketball for longer term retention in the sport.

Participation trends

- Basketball participation rates in 2016 for older adults in Victoria were very low
 - 0.3% of the state's 50-54 year old population played basketball
 - <0.1% of 65-69 year olds participated in basketball.
- More men than women across all age groups played basketball in 2016, though this disparity did decrease with age
 - At 50+ years age group, twice as many men (n=1,199) than women (n=557) participated in basketball.

Process evaluation

- **What worked well**
 - *Facilitator/Basketball Victoria engagement*
 - The patience and enthusiasm of the facilitators and BV staff.
 - *Product modifications*
 - Both program facilitators made small modifications to the program to suit program participants' capability and enjoyment. This included using the full court and standard basketball hoops (albeit at a reduced height).
 - *Competition*
 - The facilitators and program participants highlighted the importance of competition and the enjoyment older adults derived from being competitive.

- **Suggested program improvements**
 - *Venue suitability*
 - The lack of air conditioning in the venues were seen as problematic in the Summer.
 - *Improved marketing*
 - Program participants in one program stated that greater publicity was required to increase participation numbers.
 - The Basketball Victoria promotional video of walking basketball was perceived as not being pitched correctly to participants. The program participants did not identify with the video participants (particularly those using walking frames).
 - *Educational needs of facilitators*
 - This was not a consistent perception. The older facilitator did not see the need for specific older adult training, whilst the younger facilitator felt they would benefit from such training (for example, adaptive coaching and first aid for older adults).
 - *Perceptions of physical capability*
 - Both facilitators and most of the program participants felt that most program participants did not cater for their reduced physical capability. For example, some older adults are likely to fall over more easily now than when they were younger, when bumped into by a fellow participant.
 - *Resistance from family members*
 - This related to family members' opinions and perceptions as a potential barrier to participation. Some participants across both programs reported that their families had warned them against participating, due to a fear of them becoming injured or had made fun of their participation. However, this did not deter these older adults from participating in the program.

- **Learnings from the program**
 - *Length of program*
 - Program participants would prefer the program to run in the school term time, as they often care for their grandchildren during the school holiday periods.

- *Gender*
 - This was an inconsistent theme. The program with only female participants preferred single gendered sessions. The program with two male participants were largely happy with mixed gendered sessions, therefore a balance of single gender and mixed gender programs may be useful.
- *Potential cost of program participation*
 - Participants from both programs recognised the potential for future charges to enable program sustainability.
 - Program participants felt the charge should reflect other activities they undertook, with one program stating \$5 and the other \$2 per session charges.

Outcome evaluation

- **Motivations of participation**
 - *Enjoyment/fun*
 - The facilitators and program participants thought the program would be fun.
 - *Social health*
 - The program was seen as an opportunity to meet new people and reduce social isolation by both participant programs and one facilitator.
 - *Physical health*
 - Program participants saw the program as being a good opportunity to be physically active.
- **Benefits of participation**
 - *Organisational benefits*
 - Maximising facility usage. Facilities are usually vacant during the school day (as children and youth mainly participate after school).
 - Potential membership benefits (an opportunity to sell memberships to new audiences).
 - *Facilitator/participant benefits*
 - Social health
 - It was reported that program participants had fun, developed friendships and enjoyed the peer support/encouragement of being part of a team. They also appreciated family support of their participation.
 - Physical health
 - Program participants felt the sessions gave them a good workout; improved bone strength; was a different type of physical activity than other activities; worked their upper body and improved their coordination and reflexes.
 - Mental health
 - One facilitator and participants from both programs felt the program stimulated their brain and made them think (i.e. where to pass the ball).
 - Competition
 - Program participants enjoyed undertaking a competitive form of exercise. It enabled them to reminisce about their youth and re-engage in the sport.

- **Intentions of future engagement**
 - Both facilitators and all program participants stated their intention and desire to continue participating in a walking basketball program.

Key themes:

Overall, the key themes to emerge across the research were:

- **Participation trends:** Currently very few older adults participate in traditional club-based basketball programs and competitions.
- **Social health:** There was a substantial emphasis on the social health benefits of participation in the program and the importance of fun.
- **Physical health:** This was a contested concept. It was believed that the program was beneficial to physical health. However, the program facilitators, some of the program participants and a number of the participants' family members perceived that physical (in)capability could also cause issues (such as injuries) and may have deterred participation.
- **Competition:** Whilst all participants enjoyed the social and fun side of the sport, many of the program participants also enjoyed the opportunity to be competitive, which is not always available in other forms of LTPA.
- **Family influence:** This can be a positive and also potentially negative aspect of participation. In this evaluation, it appeared that family members were more cautious than older adults about injury risk, which suggests that family influence may have contributed towards drop out for some former participants (or indeed non-participation from some initially interested participants). However, program participants widely reported the support they had received from their families, particularly their children and grandchildren.
- **Intentions for future engagement in basketball:** Both facilitators and all program participants enjoyed participating in the program and are keen to continue participation in the program.

Section 1

Introduction & Aims

Walking sports have become an increasingly popular form of modified sport. The first walking sport program was walking football, which was developed by Chesterfield Football Club Community Trust in the U.K. in 2011. Since then, walking versions of rugby, netball, badminton and basketball have been developed, with programs taking place across the international setting.

Some sports offer their walking programs to adults of all ages, for example to aid injury rehabilitation or for those who are more interested in the social component of sport. However, most walking sport programs are targeted at older adults, as they offer low impact exercise, with no physical contact and are less physically demanding than sports which require running.

Global populations, including in Australia, are ageing⁸ and ageing is often associated with a decline in health⁹. As physical activity can improve all types of health^{10,11}, public health bodies are advocating for more older adults to be physically active. Sport, as a form of physical activity, can provide health benefits, but older adult participation in traditional sport is very low¹². As modified sport can provide more appropriate participation opportunities for older adults, there is an opportunity for older adults to be more physically active through modified sport. Therefore, it is important to evaluate current walking sport programs, to further understand how modified sport can enable more older adults to be physically active.

Furthermore, modified sport programs offer National and State Sporting Organisations the opportunity to engage with older adults, as active participants. Previous research has suggested that benefits sporting organisations can derive from older adults actively participating in sport include volunteering; maximising facility usage; intergenerational opportunities, for example older adults introducing their children/grandchildren to that sport; and maintaining a sporting fan base⁵.

Aims

The aims of this research:

1. Participation trends – To understand the participation patterns in basketball, specifically the current participation of older adult aged registered basketball club members in Victoria.
2. Process evaluation – To investigate from the perspectives of the program facilitators and participants: the components of the program that worked well; suggested program improvements for future iterations of the program; and learnings from the program, such as schedule and potential future changes.
3. Outcome evaluation – To investigate from the perspectives of the program facilitators and participants: the motivations and benefits of participation in the program. Furthermore, the intentions of participants and facilitators to continue being actively involved in basketball for longer term retention in the sport.

Section 2

Research Methodologies

Sport and Recreation Spatial

The Sport and Recreation Spatial research team provided the Basketball Victoria participation data and reporting from registered club-based participants in Victoria in 2016 for this report.

Walking Basketball Program evaluation

Data collection:

The evaluation data were collected from two walking basketball programs. At the time of data collection, most of the walking basketball programs in Victoria were deemed inappropriate for evaluation, as they had only just recently started. The two programs selected for evaluation had been running for at least six sessions.

The data were collected from two cohorts: the program facilitators (*facilitators*) and the older adult program participants (*program participants*). These were collected via individual interviews with the facilitators (n=2) and three focus groups with the program participants (total n=21). For the focus groups, there was one group of active participants from one program, and in the other program, one group was run with active participants and one group with currently injured (but previously active) participants. Some of these injuries had occurred in the walking basketball sessions.

This evaluation was approved by the Victoria University Human Research Ethics Committee. The facilitators were initially contacted by BV and then by the researchers prior to the interview. They were provided with information sheets and consent forms. The program participants were informed of the research project by the respective facilitators and BV, with information sheets and consent forms provided by the researchers, prior to the research being conducted.

The interview and focus group questions were developed in partnership between BV and the researchers, to gain an understanding of the type of participants in the program; why they participated and how to improve the program.

Data analysis:

The two interviews and three focus groups were transcribed and analysed using thematic analysis, which involved grouping the main ideas that were discussed into similar themes. The themes that emerged from the interviews and focus groups have been categorised into six sections, which are presented in Sections 4 and 5:

- Section 4:
 - What worked well
 - Suggested program improvements
 - Learnings from the program

- Section 5:
 - Motivations for participation
 - Benefits of participation
 - Intentions for further engagement in the program

The main themes (that were reported by both facilitators and program participants) are presented first, followed by themes reported across the three focus groups. Finally, any minor themes which were briefly mentioned but provided an interesting perspective, conclude each section. These are entitled 'main themes', 'program participant themes' and 'minor themes' respectively.

Study participants:

The walking basketball program facilitators were one male and one female, one aged 35 years and the other 52 years old. They both had a history of basketball coaching (one for 12 years, one for 37 years), with one mainly focusing on elite youth and one on community participation.

The older adult walking basketball program participants were mostly female (90%). This gender bias of the study participants reflects the gender balance within the walking basketball programs. The average age across the three focus groups was 70 years old, with a range of 56-82 years.

Of the 21 walking basketball program participants in the focus groups, 62% have previously played sport, whilst 38% had been active throughout their life, but not necessarily through sport. Twenty four per cent of program participants had previously played basketball. There were 48% of participants who had family members that currently, or had previously, participated in basketball. These include husbands, children and/or grandchildren.

Section 3

Participation Trends: Current basketball participation patterns for older adults

The data in this section were provided by the Sport and Recreation Spatial team and included basketball participation rates in Victoria in 2016. This data covered participation rates across the lifespan for participants of BV affiliated clubs, with participants' age and sex analysed to understand participation patterns in basketball.

In this section, participation patterns for older adults (50 years and older) will be highlighted, to understand how many older adults played traditional basketball and whether they were male or female.

Age specific participation rates

As demonstrated in Figure 1, basketball participation for adults over 50 years old was very low. For example, for adults aged 50-54 years old (in the younger range of the older adults' category), only 0.3% of the population played basketball in 2016, whilst in the older section of the older adults' category, less than 0.1% of 65-69 year olds participated in basketball in 2016.

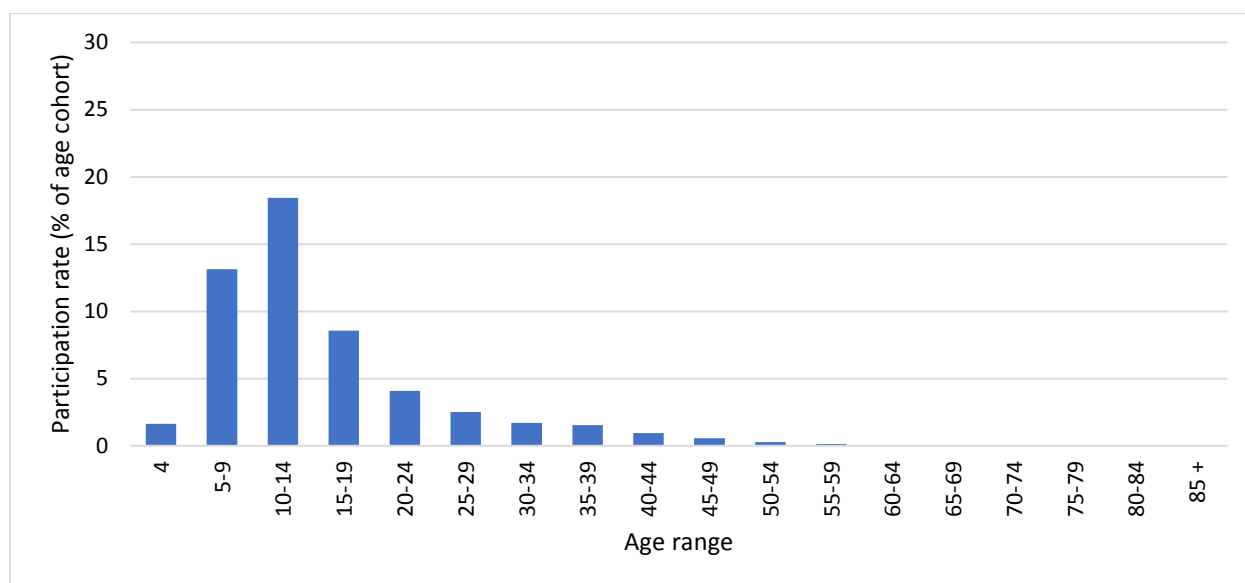


Figure 1. Age-specific participation rates, 2016, Victoria

Gender specific participation rates

As demonstrated in Figure 2 below, for most age groups, more men than women participated in basketball. Although the gender gap decreased with age, even in the mid-aged groups, this gender bias remained. For the older adult category, more than double the number of men (n=1,199) than women (n=557) played basketball, although participation rates became comparable in the 80+ year age range. However, interestingly, in the two walking basketball programs that were evaluated as part of this report, the majority of the participants were female.

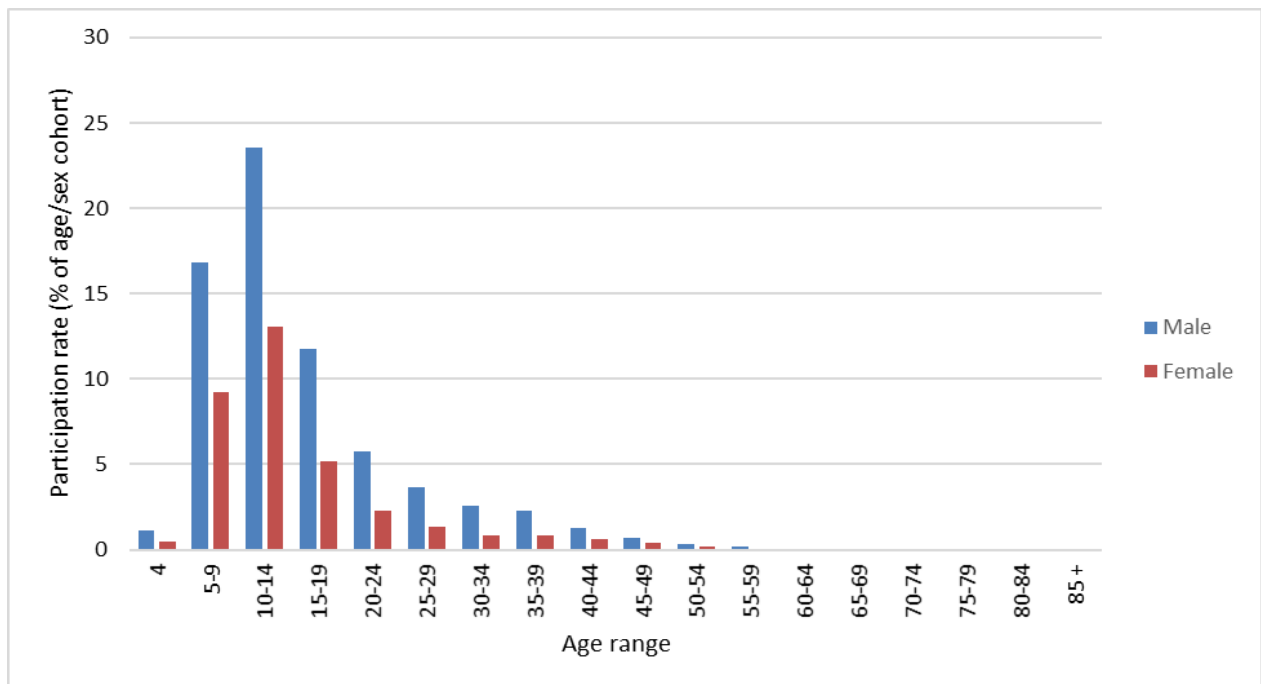


Figure 2. Age-specific participation rates, 2016, Victoria: by sex

As in most sports, these figures suggest that participation was high in the younger age categories. The reason for low older adult participation in basketball may be multi-faceted, but a lack of appropriate opportunities may have influenced their lack of participation. Previous research has suggested that modified sport that caters for reduced physical capability and an emphasis on the social component of sport, may be more suitable for older adults than traditional sport¹³. As walking basketball embodies these components, it can be deemed an appropriate activity for adults as they age. Therefore, there is a great opportunity for Basketball Victoria to engage former basketball players in active participation at an older age, through the walking basketball program.

Section 4

Process Evaluation: what worked well and suggested program improvements

What worked well

Facilitators and program participants were asked to identify what aspects of the program if any, they thought worked well.

Main themes

- **Facilitator/BV engagement**

- The program participants identified the patience and enthusiasm of the facilitators and BV staff as an aspect that worked extremely well

"They're just wonderful and yeah, they're smiling and you want to do well for them" (82 year old female participant) and *"it's been great because the way the two guys that have introduced us to it, you know, like giving us the skills and stuff. And also, the patience and encouragement, and they've realised, like when it's 36 degrees, you know, just sort of, "if you want to sit down", so there's been no pressure what so ever throughout the whole, you know, introduction to it"* (70 year old female participant).

- **Product modifications**

- Both program facilitators made further modifications to the walking basketball product to suit participant capability and enjoyment. These included using the full court and using standard basketball hoops rather than the specific self-standing hoops (the standard hoops were lowered to 8ft, rather than the regulated 10ft in these instances). The facilitators and participants across both programs felt this worked well

"We did a lot more ball handling, less kind of dribbling...so they're getting used to kind of having a ball in their hands and doing different things with it. It's not necessarily related to the game specifically, but more related to general kind of dexterity and kind of ball movement and body movement" (Facilitator).

- **Competition**

- Both facilitators recognised program participants' need and desire for competition

"Their competitive juices take over" (Facilitator) and *"It's people's nature to be competitive"* (72 year old female participant).

Program participant themes

- **Marketing**

- Program participants felt the programs were marketed well, however these were marketed differently. One was through word of mouth, whilst the other was through a newspaper article, written by an older adult participant of the program

"The way it [the program] was presented in the newsletter was good...maybe more could have been written, but just to say that you don't have to have played basketball...I think that's important"

because people see themselves as inactive, to suddenly go play a basketball game is just a big step too great for them” (70 year old female participant).

Minor themes

- **External partnerships**
 - There was a good partnership with an older adult organisation in one program. The facilitator felt the partnership worked well to drive interest and engagement with program participants. The participants felt the buy in from their Life Activities Club and their residential village (for example, to provide a community bus and install a basketball ring in the village) worked well. They also felt the support from the local council and the stadium (the latter were friendly and provided cups of tea) was a valuable part of the program.
 - On the other program, the participants were also part of an external club, who informed them of the program.

- **Provision of uniforms**
 - One program was provided with uniforms, which gave the participants a sense of belonging.

- **Shared experience of basketball**
 - Participants in one program felt the shared experience of regularly attending the stadium to support their grandchildren playing basketball, enabled the walking basketball program to work well.

- **Time of program**
 - One program mentioned that the timing of the sessions (during the week day) worked well.

Suggested program improvements

Facilitators and program participants were asked what aspects of the program they felt could be modified to improve the program.

Main themes

- **Venue suitability**

- Both facilitators and participants across the two programs identified the lack of air conditioning as an issue in the venues (caveat: this data collection took place in summer, after sessions where the outside temperature was in mid-30s°)

“The last couple of games that we’ve played, it’s been in excess of 36°, and I think we all visualise this nice air conditioned room at our afternoon tea!” (78 year old male participant).

- **Perceptions of physical capability**

- Both facilitators and participants from both programs felt the program participants did not account for their reduced physical capability when playing walking basketball. For example, some older adults are likely to fall over more easily now rather than when they were younger, when bumped into by a fellow participant

“Your mind tells you that you can do it, your body doesn’t [agree]” (72 year old female participant) and *“We forgot how old we were...we became very competitive!...I fell over my own feet, so it was my fault”* (female participants, aged 67 to 72 years old).

- This led to some sessions being quite repetitive for one program. However, for the other program, the facilitator developed different activities to account for reduced physical capability, but also managed to avoid repetition.
- Accounting for reduced physical ability required strong leadership from the facilitators to manage the true physical capability of older adults.

- **Improved marketing**

- Participants in one program felt the program needed more publicity. However, if this occurred, then set guidelines/rules for the sport would need to be formed, such as age restrictions.
- One program felt the BV promotional video of walking basketball was a deterrent for participation, as it showed older adults using walking frames (which they did not identify with)

“We got a video and it was people with walking frames... And it was only half a court and the ball going into this net. And we said ‘nah, we’re not doing that’” (66 & 69 year old female participants).

- One facilitator felt the venue could better promote the sessions for new program participants.

- **Educational needs**

- The two facilitators had differing opinions on this topic. The older facilitator felt they did not require specific training for working with older adults, as they used ‘common sense’, whereas the younger facilitator felt they would benefit from specific training (such as adaptive coaching and first aid for older adults)

“If a kid falls over and starts crying, they just go and sit down for two minutes and then they’re back here. But, you know, if an elderly person falls over they kind of, you know, you want them to sit down and kind of work out what’s happened, whether they’ve been injured in a serious kind of way...And there’s only me on court with 15 people, I’ve got to kind of attend to this person, everything’s going to stop. You know, like, do I have to call a paramedic or something or do you know like, I’m not sure” (Facilitator).

Program participant themes

- **Risk of injury**

- Participants across both programs felt there were a number of issues that increased the injury risk, which also links to perceptions of physical capability
 - Use of BV portable basket. One group felt this was too flimsy and had caused participants to trip, which led to the Facilitator using the standard basketball hoop

“When we first started, for the first few weeks, we also had the small basket, and we found the small basket, when everybody’s trying to put that, because you can just put your hand in, there was people being knocked over. We found it better when we went to the full court on the lower ring, than the oldies basket” (78 year old male participant).

- One program believed that their competitive nature and enthusiasm at the start of the program caused some injuries. The facilitator noted this and ensured participants were taught the rules to encourage their understanding of the importance of controlling their enthusiasm
- At the beginning of one program, there were some male players who were physically large. This resulted in some other participants inadvertently being knocked over, and subsequently dropped out of the sessions. These male participants realised their physicality was negatively impacting others and also dropped out.
- For the program participants who were currently injured (some through the program), they wanted to start participating again once they had recovered. They felt the benefits of the program outweighed the risk of future injury.
- One facilitator felt the session should have a specific first aid kit and radio to cater for potential injury risk.

- **Resistance from family members**

- This related to family members’ opinions and perceptions as a potential barrier to participation. Some participants across both programs reported that their families had warned them against participating, due to a fear of them becoming injured or had made fun of their participation. However, this did not deter these older adults from participating in the program, but may have deterred non-participants from joining the program.

“You’re not going to embarrass us are you?” (69 year old female participant) and *“My husband was a bit ‘what if you break something, what if you do this?’ and I went ‘oh well”* (71 year old female participant), and *“don’t get yourself hurt”* (66 year old female participant) and *“you’re far too old to do that Granny”* (74 year old female participant).

Minor themes

- **Peer resistance**
 - Some participants in one program felt that some of their peers in their retirement village were not supportive of their participation

“They take the mickey out of us, but we don’t care, because we’re doing something and you’re all sitting on your bum” (67 year old female participant).

- **Attendance issues**
 - One facilitator noted that it was difficult to plan sessions, as the attendance numbers fluctuated each week.
 - One program wanted to develop a competitive team from the session, that would be able to compete against teams from other programs. However, they noted that they would require more players for this (in the same program, some participants just wanted a social walking basketball session, so wanted the possibility to have both options available for participants).
- **Competing priorities**
 - One program noted that older adults have a number of other priorities, which can impact their attendance. For example, caring for grandchildren (especially during holiday periods); holidays; and/or medical appointments.
- **Insurance**
 - Some participants in one program were concerned that their participation would not be covered under their Life Activities Club insurance policy.
- **Physical health issues**
 - In one program, participants noted that some older adults had dropped out of the sessions due to poor physical health, such as aches and pains.
- **Coach-athlete ratio**
 - One facilitator felt that when there was high older adult attendance (above 15), the coach-athlete ratio was too high.
- **Timing of equipment delivery**
 - One facilitator stated that the BV equipment was delivered once the program had commenced and so felt that in the future, it should be delivered prior to the program starting.

Learnings from the program

Program participants were asked their preferences for the length and reasonable potential charges (the program does not currently charge participants to take part) for future iterations of the program.

Program participant themes

- **Length of program**
 - Both programs felt that the sessions should take place in school term time only. Participants cited caring for their grandchildren during holiday periods and taking holidays in the Melbourne winter as reasons for this scheduling.

- **Gender**
 - This was a varied theme. The program with only female participants did not want to introduce mixed gendered sessions.
 - The mixed gendered sessions only included a couple of male participants. Two participants felt that there should be single gendered sessions (including one of the male participants), whilst the remaining seven participants enjoyed the mixed sessions and did not want single gendered sessions. The whole group though did note that some people had previously dropped out due to the perceived increased risk of including some male participants.
 - Therefore a balance of single gender and mixed gender programs may be useful.

- **Potential charges for the program**
 - Both programs felt that financial charges to safeguard the future sustainability of the program were reasonable, but the amount differed.
 - Both programs felt the charge should reflect other activities they undertake:
 - One program felt \$5 per session was reasonable
 - One program felt \$2 per session was fair (caveat: for this program, their Life Activities Club currently subsidises other activities, which is likely to have influenced this costing).
 - One program felt it would be fair to charge the full amount at the start of the term, to ensure the sustainability of the program was not reliant on inconsistent attendance.

Section 5

Outcome Evaluation: Motivations and benefits of program participation

The facilitators and program participants were asked what encouraged them to be involved in the walking basketball program.

For the facilitators, their involvement in the program was part of their regular, paid job. One was very enthusiastic about the program, whilst the other enjoyed it, but was less enthusiastic.

Motivations for participation

Main themes

- **Enjoyment/fun**
 - Both facilitators and program participants were motivated to participate because they thought the program would be fun

“I was dubious at the start because I didn’t understand what it was about, but I just really wanted to have some fun as a team” (65 year old female participant).

- **Social health**
 - The program was seen as an opportunity to meet new people and reduce isolation

“It gives us something to look forward to” (66 year old female participant) and *“[I attend for] the company”* (69 year old female participant).

Program participant themes

- **Physical health**
 - Program participants saw this program as being a good opportunity to exercise

“it’s good for your upper body. Like, I’m sure we all walk or ride a bike or do something, but it’s just good for your upper and your coordination and all of that really. That’s what I thought sort of encouraged me” (70 year old female participant).

- **New type of exercise**
 - Program participants wanted to try a different/new type of activity.

Minor themes

- **Re-engagement in basketball**
 - Some of the program participants in both programs used to play basketball at a younger age and saw this program as an opportunity to re-engage in the sport

“I used to play basketball and loved it so much and now at the age we are, to be able to be given that chance to go back and play again” (69 year old female participant) and *“I just thought I had finished sport, my life in the sense is gone. And now all of a sudden it’s come back again”* (66 year old female participant).

- **Family influence**
 - In one program, a program participant saw the benefit their children and grandchildren derived from team sport and wanted this opportunity for themselves.

- **Peer inspiration**
 - One of the younger program participants was inspired by the participation of an older participant in the program

“For me being a bit younger, it’s a big inspiration to see people like [older participant], who had a hip replacement and all this surgery just do it, you know? You sort of think ‘wow, in 20 years’ time or whatever, I can do this’. It’s really great” (57 year old female participant).

- **Basketball sessions were part of an existing program**
 - The sessions were part of an externally organised Seniors Week and also an activity offered by Life Activities Clubs, for which most program participants were already members of.

Benefits of participation

Facilitators and program participants were asked what benefits, if any, they derived from the program. Facilitators identified organisational benefits, benefits they had personally derived and also the benefits they believe participants derived from the program, whilst program participants identified benefits they had gained from the program.

Organisational benefits

Main themes

- **Maximising facility usage**
 - Both programs took place during the week day at off peak times, where there was usually unutilised court space.
- **Potential membership benefits**
 - Both facilitators highlighted that the program provided an opportunity to sell memberships to this new audience.

“Hopefully we get a bit of a flow on...you know people buy memberships and they want to come watch us play, that’s you know, that’s an added bonus” (Facilitator).

Minor theme

- **Positive public relations (PR) opportunity**
 - One facilitator highlighted the opportunity to generate positive PR for the basketball club/venue by publicising this program

“We’ve put it on social media...representatives from the council have come down and kind of, I think they’ve put it on their website...there’s a bunch of different cross benefits” (Facilitator).

Facilitator/participant benefits

Main themes

- **Social health**
 - Facilitators both enjoyed leading the program and felt an intrinsic benefit of seeing the program participants’ enjoyment and skill progress/improved confidence

“I don’t think they realise what they’ve given to me. Like they think that I’m giving them a lot, but they’re giving me a lot” (Facilitator) and *“I get a little bit of an intrinsic award from it, because I’m communicating with people and I’m helping them get better and helping them exercise”* (Facilitator).

- One facilitator felt the program had reduced their own social isolation and helped them recover after a family bereavement

“it’s been good for me, just because I sat at home a lot when I’m not at work and dwell on what I’ve lost, and to come here, that takes it away” (Facilitator).

- Facilitators felt the program participants had fun and had developed friendships from the program. Similarly, program participants highlighted that the program was fun, that they had developed friendships through the program and enjoyed the peer support/encouragement of being part of a team

“It’s great meeting new people that have been in the village that we hadn’t known” (72 year old female participant), and *“they don’t shake hands at the end of the game, everyone gets a hug...the other ladies are actually really involving these ladies that aren’t as good as them and really*

encourage them and I'm thinking 'that is so, so good' because that just brings her confidence up" (Facilitator) and *"If you get a goal, that's great. If it doesn't, well, you know, you get it next time. You know, there's no pressure at all"* (70 year old female participant).

- Facilitators sensed the older adults used the program to bond with their families, which was also noted by the program participants. Participants' families watched the sessions regularly. On one program, their families had developed a song to celebrate their participation

"I've got their grandchildren or their daughters and sons coming up and thanking me. And even their kids, their children, coming to watch them play" (Facilitator)

"My kids were rapped...they find it amazing that we're doing it" (72 year old female participant) and *"My daughter laughs her head off... 'Mum, it's good to see you're out there and that you're fit'"* (72 year old female participant) and *"We've got a team song...we are the Officer Dribblers... our granddaughters made this up, the song"* (69 year old female participant).

- The program participants enjoyed the socialising post session (tea and biscuits) too.

- **Physical health**

- One facilitator and participants from both programs recognised the physical health benefits of the sessions. Program participants felt it gave them a good workout; developed their bone strength (as it is an impact sport); was a different type of exercise, especially that it worked their upper body (compared to other forms of LTPA); that it had improved their coordination and reflexes; and had contributed to weight loss. They felt the program was a form of incidental exercise

"It's an impact sport so you're creating impact on your bones, that gives you good bone strength. Also, helping with your reflexes and your balance, helping you with your cardio, there's skills for both arms and legs in it. So, I think it's a really good all-round activity" (71 year old female participant) and *"The basketball, for me, has encouraged me to exercise more"* (66 year old female participant).

- **Mental health**

- One facilitator and participants from both programs felt the program stimulated their brain and made them think (i.e. where to pass the ball)

"You've got to think of other people, it's not all about you...you're looking out for other people you're going to pass the ball to...I've got to keep thinking, 'right, you know, I've passed the ball to them, not just rush off myself and try to think'" (57 year old female participant) and *"It's stimulating, it stimulates your brain"* (69 year old female participant).

- **Competition**

- Participants in both programs enjoyed the opportunity to undertake a competitive form of exercise.
- In one program, participants felt that the program enabled them to reminisce about their youth and enabled them to re-engage with the sport

"I just think it does take us back to our youth a little bit, because you know, you can look back and you enjoyed all of those things...why can't we go on enjoying them all?" (70 year old female participant).

- **Skill development**

- Program participants saw the benefit of learning new skills. This also gave them a sense of achievement

“Well for me it was actually playing a sport for the first time, because, you know, I always used to say no to people and that “aw I’ve never played sport”. You know, “I haven’t got a clue, I’m hopeless”. And being able to sort of play it and get that ball through the ring...now I can understand what my kids got out of it” (65 year old female participant).

Minor theme

- **Opportunity to try something new**

“It shows you’re never too old to learn something new doesn’t it? I mean, these people that go around, ‘I can’t do that, I’ve reached 60’, or ‘I’ve reached 70’. To hell with the numbers. You don’t talk numbers, you talk what’s up here, and you just get on with it and do it. Otherwise, what’s the pleasure of sitting and watching tv all day? It’s a bit boring isn’t it?” (80 year old female participant).

Intentions for further engagement in the program

Program participants and facilitators were asked if they had the intention to stay involved in basketball after the program. Both facilitators and the older adult participants stated they would like to continue participating in the walking basketball program. One facilitator was very enthusiastic to continue participating, as were all of the participants. One facilitator was happy to stay involved if it remained within the remit of their job.

Section 6

Synthesis of findings and recommendations

There were a number of key concepts that emerged from this research, in particular:

- **Participation Trends**
 - There were very few older adults who participated in traditional club-based competitive basketball.
 - These programs seemed to have attracted people who were already active (though not necessarily in basketball), rather than inactive older adults.
 - Basketball participation patterns in Victoria showed that in the majority of age groups, most participants were male. However, in the two programs evaluated, most of the participants were female. This was not by design, but the programs seemed to attract more women than men, when advertised through Life Activities Clubs. The potential reasons for this could be further explored, to try to understand this pattern.

- **Process & Outcome Evaluation**
 - **Social health:** Across the two programs, there was a substantial emphasis on the social health benefits and the importance of fun.
 - **Physical health:** This was a contested concept. It was believed that the program was beneficial to physical health. However, the program facilitators, some of the program participants and a number of the participants' family members perceived that physical (in)capability could also cause issues (such as injuries) and deter participation.
 - **Competition:** Whilst all participants enjoyed the social and fun side of the sport, many of the program participants also enjoyed the opportunity to be competitive, which is not always available in other forms of LTPA.
 - **Marketing:** The marketing for both programs was driven by older adults. For example, word of mouth from older adults to other older adults. Also, the newspaper article to promote the one program was written by an older adult participant, using phrases and language attractive to this age group.
 - **Family influence:** This can be a positive and also potentially negative aspect of participation. In this evaluation, it appeared that family members were more cautious than older adults about injury risk, which suggests that family influence may have contributed towards drop out for some former participants (or indeed non-participation from some initially interested participants). However, program participants widely reported the support they had received from their families, particularly their children and grandchildren.
 - **Intentions of future engagement in walking basketball:** All enjoyed participating in the program and were keen for it to continue.

A number of the themes (including potential social and physical health benefits, the focus on enjoyment and maximising facility usage) reinforced previous research on the benefits that older adults and organisations could derive from sport^{5,10,11,13}. Thus, there are a number of opportunities for sport (including basketball) to assert itself as a LTPA option for older adults. For example, the social health benefits of being part of a team; the physical health benefits of improving coordination,

reflexes and an upper body workout; and the opportunity to be competitive, which are not always prevalent in other forms of LTPA.

Recommendations

Although this evaluation only covered two programs, the following recommendations could be implemented across all walking basketball programs:

- Continue the focus on the **social, fun and enjoyment** aspects for program participants.
- Continue providing the opportunity for **competition** in the program. Some participants wanted external competitive fixtures, whilst some wanted the sessions to retain the social and fun atmosphere. Ensure that both types of participants are catered for.
- To increase participation, it may be easier to **target those already active**, rather than inactive older adults. It may also be advisable to try snowballing techniques by asking current participants to encourage their friends to also play.
- **Utilise older adults when preparing marketing material.** For example, ask older adult participants to contribute to the written content and design of promotional materials to ensure the marketing materials are attractive for this age group.
- Provide flexibility for local facilitators to **further modify the program** to cater for their respective program participants' capabilities and enjoyment.
- Offer facilitators the opportunity for **external training** if they require/want further upskilling to work with older adults.
- **Engage older adults' family members.** This could help the program in two ways. Firstly, improve participants' social health, as family members often provide critical social support. It may also reduce some resistance that family members may have to older adults' participation.
- Preferably programs should take place during the **school term time**. There should also be **female only**, as well as **mixed gender** programs.
- Participants are **willing to pay** to ensure the sustainability of the program, as long as the costs reflects the cost of other LTPA sessions they attend.

References:

- ¹ Basketball Victoria. Walking Basketball. Retrieved from <http://basketballvictoria.com.au/walking-basketball/>
- ² Bauman A, Phongsavan P, Schoeppe S, Owen N. **Physical activity measurement – a primer for health promotion.** *Promotion & Education*, 2006. **13**(2):92-103.
- ³ Heo J., Culp B., Yamada N., Won Y. **Promoting successful aging through competitive sports participation: Insights from older adults.** *Qualitative Health Research*, 2013. **23**(1): p. 105-113.
- ⁴ Lyons K., Dionigi R. **Transcending emotional community: A qualitative examination of older adults and masters' sports participation.** *Leisure Sciences*, 2007. **29**(4): p. 375-389.
- ⁵ Jenkin C.R., Eime R.M., Westerbeek H. O'Sullivan G., van Uffelen J.G.Z. **Are they 'worth their weight in gold'? Sport for older adults: benefits and barriers of their participation for sporting organisations.** *International Journal of Sport Policy and Politics*, 2016. **8**(4): 663-80.
- ⁶ Eime R. M., Casey M. M., Harvey J. T., Charity M. J., Young J. A., Payne W. R. **Participation in modified sports programs: a longitudinal study of children's transition to club sport competition.** *BMC Public Health*, 2015. **15**(1), 649.
- ⁷ Sport and Recreation Spatial. Retrieved from www.sportandrecreationspatial.com.au
- ⁸ World Health Organisation. **World Report on Ageing and Health.** 2015. Retrieved from http://apps.who.int/iris/bitstream/10665/186468/1/WHO_FWC_ALC_15.01_eng.pdf?ua=1
- ⁹ Vogeli C., Shields A.E., Lee T.A., Gibson T.B., Marder W.D., Weiss K.B., Blumenthal D. **Multiple chronic conditions: prevalence, health consequences, and implications for quality, care management, and costs.** *Journal of General Internal Medicine*, 2007. **22**(3), 391-395.
- ¹⁰ Rydwick E., Welmer A.K., Kareholt I., Angleman S., Fratiglioni L., Wang H.X. **Adherence to physical exercise recommendations in people over 65—the SNAC-Kungsholmen study.** *The European Journal of Public Health*, 2013. **23**, 799–804.
- ¹¹ Toepoel V., 2013. **Ageing, leisure, and social connectedness: how could leisure help reduce social isolation of older people?** *Social Indicators Research*, 2013. **113**, 355–372.
- ¹² Eime R. M., Harvey T., Charity M. J., Casey M. M., Westerbeek H., Payne W. R. (2016). **Age profiles of sport participants.** *BMC Sports Science, Medicine and Rehabilitation* 2016. **8**(1), 6.
- ¹³ van Uffelen J., Jenkin C., Westerbeek H.M., Biddle S.J., Eime R.M. **Active and Healthy Ageing through Sport.** Report prepared for the Australian Sports Commission. Melbourne: Victoria University. 2015.

